

IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF SOUTH CAROLINA
Pro Se Non-Prisoner Complaint Form

[Enter the full name of the plaintiff in this action]

James B. Shultz

) Civil Action No.

) (to be assigned by Clerk)

v.

[Enter the full name of each defendant in this action. If possible, please list only one defendant per line.]

Doctor Peggy Melton

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USDC CLERK, COLUMBIA, SC
2016 FEB 12 AM 10:35

If allowed by statute, do you wish to have a trial by jury? Yes _____ No _____

[If any answer requires additional space, please use additional paper and attach hereto.]

I. PREVIOUS LAWSUITS

A. Have you begun other lawsuits in state or federal court dealing with the same facts involved in this action?

Yes _____ No ☒

B. If your answer to A is Yes, describe the lawsuit in the space below. [If more than one lawsuit, describe on another sheet of paper using the same outline.]

1. Parties to this previous lawsuit:

Plaintiff: _____

Defendant(s): _____

2. Court: _____

(If federal court, name the district; if state court, name the county)

3. Docket Number: _____

4. Name(s) of Judge(s) to whom case was assigned: _____

5. Status of Case: _____
(For example, was the case dismissed? Settled? Appealed? Still Pending?)

6. Date lawsuit was filed: _____

7. Date of disposition (if concluded): _____

C. Do you have any other lawsuit(s) pending in the federal court in South Carolina?

Yes _____ No ☒

II. PARTIES

In Item A below, place your name and address in the space provided. [If additional plaintiffs, do the same on another sheet of paper.]

A. Name of Plaintiff: James B. Stollen

Address: 3959 Fish Hacking Road, Haddon D.C. 29053

In Item B below, place the full name of the defendant, and his/her/its address, in the space provided. Use Item C for additional defendants, if any.

B. Name of Defendant: Doctor Peggy Wadman

Address: Columbia Regional Care Center, 7901 Farrow Rd, Columbia, S.C. 29203

C. Additional Defendants (provide the same information for each defendant as listed in Item B above):

III. STATEMENT OF CLAIM

State here, as briefly as possible, the facts of your case. Describe how each defendant is involved.

III. STATEMENT OF CLAIM - continued.

This is a professional malpractice suit against Doctor Peggy Madama for slander remarks made to the VA regional office which made them decide to rule me incompetent. This was done just a few months after I was ruled competent on an appeal letter March 12, 2013. No one doctor should be able to rule incompetent without the burden of proof as in a court because I am entitled to be judged by my own peers. Although Doctor Peggy Madama doesn't work for the VA any more her remarks can't be overturned without a court order. Two other doctors will lose and abuse patients rights just as Doctor Peggy Madama. The only solution is to get stem cell treatment to reverse this hip pain disability. Stem cell is the 21st century treatment to reverse hip pain and many more illness and diseases. I humbly pray that this court will see that my suit is for a better quality of life.

IV. RELIEF.

State briefly and exactly what you want this court to do for you.

I seek that Doctor Paggi Wladimir pay me \$1,000,000 for stem cell treatment in Mexico and that a letter of apology be sent to me asap. Although stem cell don't cost \$1,000,000 the balance is for pain and suffering

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 11 day of February, 20 16.

James B. Shupp
Signature of Plaintiff